Victoria Street Newz

Vol. 6, No. 2



"All the news that fits, we print"

Sold by donation vendor cost: 50 cents

I was born and raised in this beautiful city of ours, but a million flowers cannot hide the manure that is our social support system.

Bad things have begun to ooze around throughout the CRD, slowly evading renovation... like the cessation of affordable housing, the welfare 'reform,' or that there are only 38 detox beds in a town with over 1500

Oh, and heavens, let's not forget that pesky needle

Why can't people realize that needle exchanges breed filthy,

exchange.

disgusting conditions on our streets and that they are just a haven for addicts. Not comfortable with the last statement? Why not? Because it's true?

I hope not.

It's more likely that you felt uncomfortable about that statement because it is offensive in so many ways, and yet there are plenty of folks in Victoria who act as though they live and breathe the ignorance reflected in sentences like that.

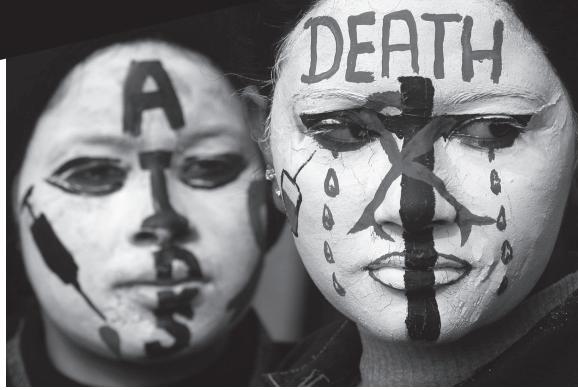
think that illicit drug users are horrible people, undeserving of the right to health care and clean supplies? Probably for the same reasons that needle exchanges are perceived as being evil: moral panic. This concept is summed up nicely by an article written in the Journal of Public Health Policy:

scientific evidence by public health advocates is understandable. In the modern era, a great divide has been drawn between facts and values, where values are now considered unamenable to objective

verification. Values have come to be regarded essentially as individual subjective preferencesdirect, unmediated, and incorrigible feelings-that

continued on pg 3





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We are devoted to a triple bottom line philosophy - concerned about our environmental and social, as well as financial, well-being.

You can contribute to social change by supporting the Victoria Street Newz team, by pondering the root causes of poverty, and by working for peaceful, non-violent change.

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Street Newz archives, and more information about us, can be found are at

relativenewz.ca



JUST ANOTHER RANT

janinebandcroft.blogspot.com

Some good Victorians, who care about that portion of our population who could benefit from some deliberately organized Harm Reduction services, contacted me early enough that we were able to co-ordinate a themed newspaper around the one year anniversary of the closure of Victoria's only (underfunded) fixed needle exchange. Folks will likely remember the controversy surrounding that ... the complaints from some local businesses who didn't appreciate all the 'junkies' and their subsequent messes and, as I recall, some threatened legal action to force the needle exchange out. Okay, as a businessperson

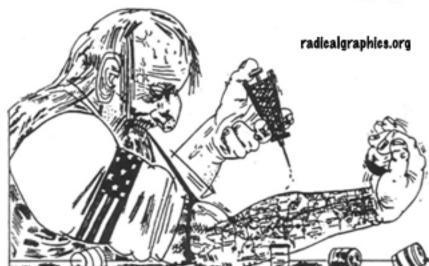
of sorts I appreciate the need to take seriously any customer complaints and concerns that could affect the organization as a whole. But what about our individual rights, as outlined in Canada's Charter, to life, liberty, and security of person? I wonder about the long term implications of simply trying to brush a problem aside, especially when the 'problem' involves living beings produced through the miracle of human birth, and nurtured by a society that values what?

And it got me thinking about addictions. What are they? Who has them? What do they say about our society and the values it promotes? What are the alternatives? And who can say they're not addicted to something? Anybody willing to admit they're addicted to Coffee? Television? The Internet? Alcohol? Sugar? Chocolate? While we're on the subject of food, how

about the globally, and locally, destructive habit of consuming animal products? There are a zillion reasons not to, but still there are 3.5 times as many livestock animals as humans on the planet, most of them suffering horribly and unnecessarily.

Then there's the oil and gas addiction. The car. The perceived need for every single individual on the planet to own at least one of them. The wars that are waged for their fuel, the landmasses that are transformed for them, the destruction of the ozone and the global climate crisis they've helped facilitate. Everything's designed around the car. If bicycles ran on oil, we'd have a lot more safe cycle paths, but instead we cyclists are expected to risk our lives competing for space alongside big metal machines that could easily kill us at any moment.

Still not convinced that we're all addicted to something? How about those familiar emotional addictions. Love. Lust. Despair. Grief. Anxiety. Denial. Pain.



Then there are the philosophical addictions. Anybody clinging to a worldview? How about these Insistence that corporate capitalism is the best economic model, even as it crumbles around us leaving millions suffering in its wake. Belief that politicians, working within an archaic colonialist model, can and will change things. Belief in a male deity who birthed the universe, and another guy who embodies all that is evil. Putting little boys in a sandbox to play with tonka trucks while little girls continue to dress barbie dolls. Striving for power and control over someone or something other than your own Self. Reaching for a social status defined by an accumulation of material wealth and possessions. Denying the obvious signs and implications of climate change. Believing that the human species has a right to dominate all other life on the planet.

We're all addicted to something. Maybe part of harm reduction is about shifting our focus to more healthy addictions. How about yoga or Tai Chi or some other healthy physical activity? We would all benefit from an addiction to environmental health, and the absolute protection of whatever remains of this beautiful planet's wild places. Then there's the eternal quest for peace and justice and equal rights for all if we were all addicted to stopping the production of war machinery, and the massive profits it ensures for a few (with smaller paycheques for a few more) the world would be a very different place.

As the saying goes before we judge others, we ought to have a good look at ourselves.

OPINION

Gangsta Government?

by Tavis W. Dodds

Nine people were arrested for drug charges just after officers raided the BC legislature in 2003. One of those arrested, Jasmohan Singh Bains was sentenced to nine months for trafficking a dozen kilos of cocaine and conspiring to traffic 50 kilos per week to Toronto. It was wiretaps of his phone that led investigators to discover severe discrepancies in the privatization of BC Rail. The Bains sentencing has become legendary amongst citizen journalist circles as an example of a newsworthy story ignored by Big Media. The story was broken by an online entity known as BC Mary acting on an anonymous tip. Five months later, Ian Mulgrew mentioned the incident in his Vancouver Sun column.

It's hard to believe that connections between provincial government and organized crime could be ignored, especially when organized crime has been of the biggest news stories for several months, but it gets easier to believe what with the recent revelations of media manipulations by the BC Liberals. Recently disclosed documents reveal that an office exists to monitor and spin media from 7 am to 9 pm, which explains a lot of the comments that show up in the media and online. Campbell had his aid pose as a caller to throw easy questions at him on a radio talk show. Only softened reporters like Michael Smythe get interviews, and the answers to these interviews are controlled by outside sources. When Cabinet Ministers write Op/Ed pieces for the papers, they're not really the ones writing them.

There's a lot more than can be gone into here to do with BC Liberal corruption of the press, and there's enough of it in this case and in the recently disclosed 8000 pages to create an essay on organized crime in BC media. Don't hold your breath looking for such an essay in BC media. Bill Tieleman, of 24 hrs, has been following this story and has had his office burglarized, his colleagues fired, and his columns killed on advice from legal consultants.

There is a lot of speculation as to the cause of all these recent assassinations in the Greater Vancouver Region. Some have blamed a proliferation of handguns, others blame the economy for rising crime, and a great bulk of analysis has focused on the drug industry (usually either the demerits of prohibition or the Mexican drug cartels targeted this month by US authorities). Quoted in the Georgia Straight, Langara

College Sociology professor Indira Prahst suggested former West Vancouver Police Chief Kash Heed would be well placed running as MLA in Vancouver's East Side, as if the gangsters all live at Main and Hastings.

Most of the killings have been in wealthy neighbourhoods, or in Surrey. It's like how the Province Newspaper can claim in its editorial section that the heroin junkies are to blame for our dead soldiers, when it seems much more likely that the fruits of this industry are being reaped by our elected officials, police officers, senior bureaucrats, and lobbyists. It's not so outlandish to think that our whole economy is being propped up by these criminal enterprises feasting on society.

Another speculation fed to us is that these killings are the result of wars between competing gangs. A more believable explanation would be that this is how the mafia down-sizes. It's much more like the scene in Goodfellas where all the possible leaks get killed off to protect those at the top. When rival gangs in Montreal fight, it certainly doesn't look like this. It's more messy. At least a few of these high-profile murders have taken place in Gordon Campbell's riding of Point Grey.

This issue is not going away. We are going to be forced to listen as the issue of crime gets beaten to absurdity in coming weeks and months. It conveniently justifies massive increases in security, infringements on civil liberties, criminalization of the poor, and the crucifixion of a few young scape-goats like Jasmohan Bains. The real criminals (probably over the age of 45, earning more than 80k/yr, and never setting foot in East Van) are likely separated by fewer degrees from Vanoc, City Hall, Gordon Campbell, and the top cops than they are separated from the guys with an ounce or two of contraband in their possession.

For more information check BC Mary's blog: bctrialofbasi-virk. blogspot.com

Tavis has been floating back and forth across Canada for 5 years of solidarity with the homeless, as both a homeless person and a homeless activist.



Needle Exchanges are Evil?? cont'd from cover

are therefore not rationally defensible nor subject to reasoned refutation. We like something or we do not. It is just how one feels about a situation and one cannot be mistaken in their feelings. This perception is reflected in that most common conclusion to almost any discussion these days, the catch-all phrase, 'Well, everyone is entitled to their own opinion.' Many people feel that it is pointless even to try to discuss or debate the values underlying heated public controversies, since it seems little or no rational headway can be gained. Thus, there is an almost desperate sense that, if any progress is to be made, it can only be made by the appeal to 'objective,' 'value-neutral' scientific empirical data. The apparent lack of grounds for determining the validity of different value positions is indeed a real problem that bedevils our time...

So it seems that instead of adhering to reason and science, which shows that needle exchanges are vital in disease prevention and are recognized as an essential health care service by the World Health Organization, some people are adhering to fear. And fear says that, "we don't like this needle exchange concept. It condones drug use, which is illegal. It attracts scary people to the neighbourhood. It is a symbol of society's weakness and sin. It is just plain wrong."

But the reality is that illegal drug use will continue whether there is a needle exchange or not. The folks who are using drugs downtown, in view of other members of the public, are still downtown, even though there is no more needle exchange. We must understand that having no home, no warmth, nowhere to go, and health problems, tends to create a serious need to cope. And drugs are a big coping mechanism for many members of our community. It's just that the folks who are 'coping' on upper Pandora happen to be more visible than the folks who are 'coping' at home with their drug of choice. We can't be hypocritical.

We need to solve a multitude of social ills before we can hope to see the folks who have to be on the streets off the streets. Until then, at the very least there should be measures in place to protect them, and the entire community. Needle exchanges can provide such protection, in the form of harm reduction supplies, nursing care, education, moral support and dignity. So if needle exchanges are truly evil, then evil must be good.

Article inspired by: Empirical Science Meets Moral Panic: An Analysis of the Politics of Needle Exchange Author(s): David Buchanan, Susan Shaw, Amy Ford, Merrill Singer Source: Journal of Public Health Policy, Vol. 24, No. 3/4 (2003), pp. 427-444

Cover photo: College students display HIV/AIDS awareness messages on their faces during a face painting competition in the northern Indian city of Chandigarh January 17, 2009. India has the world's third largest HIV-positive caseloads. REUTERS/Ajay Verma (INDIA)

Emily is an island-born advocate for equally accessible and dignified healthcare. She flew very wrong before she learned to fly right and is graduating from UVic with her BSc this June. She also believes in taking a multi-viewed stance on issues in an attempt to understand why an opponent is one so that they may be turned into an ally.

Harm Reduction TIPS

- 1. To make sure your pipe lasts longer from breaking and cracking, move the flame along the whole pipe. Let the pipe cool down before using it again.
- 2. Avoid sharing pipes. Always use your own. If you have to share, clean the pipe with an alcohol swab and always use a mouthpiece.
- **3.** Roll or ball up (4-5) screens in your pipe. Pack them down. Continue to add and pack down your screens with wour pusher. Brillo can cause serious damage and bleeding to your lungs.
- 4. Protect your lips by covering your pipe with a mouthpiece. Infections like HIV and Hepatitis can be spread by sharing through cuts and burns on your mouth.
- 5. Use a chopstick or a wooden stick as your pusher. Plastic is toxic when melted, and a metal pusher can chip small pieces of glass in your lungs.
- 6. Protect yourself by using condoms or latex to prevent infections and diseases. Female condoms can be inserted 8 hours prior to having sex.
- **6.** Protect yourself by using condoms or latex to prevent infections and diseases. Female condoms can be inserted 8 hours prior to having sex.
- 7. Drink lots of water to prevent headaches and dehydration. Take a multi vitamin. Rest and sleep whenever you can.
- **8.** Don't push someone else's pipe.

CORRECTION: Some names in Gordon Pollard's provincial poll (reflecting the 2005 election results) were incorrectly transcribed into the April Street Newz. Whoops! Here's the correct info. The full article is archived at RelativeNewz.ca.

Victoria-Beacon Hill Street Newz Poll Victoria-Beacon Hill 2005 Election

Carole James (New Democrat) 55.6 %	Carole James (New Democrat) 57.0 %
Dallas Henault (B.C. Liberal) 33.2 %	Jeff Bray (B.C. Liberal) 30.6 %
Adam Saab (Green)	John Miller (Green) 10.9 %
Others	Others 1.5 %

Losing Ground: The Closure of Victoria's Needle Exchange

by Bernie Pauly and Joan MacNeil

On May 31, 2008, one of the longest running needle exchanges in British Columbia closed its doors and went mobile. While there have been promises of a new location, we are still waiting. While we wait, many people have limited access to needle exchange services essential to staying safe.

Last spring, just before the closure, we were doing an evaluation of needle exchanges on Vancouver Island to provide AIDS Vancouver Island with feedback on ways to improve access to services, especially for women, people in remote areas and for Aboriginal people. Many people shared with us the stories of survival, trauma and abuse that have affected them deeply and compel us to continue advocating for needle exchange

We talked to people at four needle exchange sites on the Island and found that needle exchanges services in Victoria became increasingly difficult to access when the fixed site closed its doors. The number of people reached by AVI dropped from 373 in May to 273 in June, 2008 (MacNeil & Pauly, 2008). We found that the number of needles being distributed dropped initially by over 50% and six months after the closure was still 30% lower than before the closure. Approximately 52% of the needles distributed were being recovered. This is about 30% lower than preclosure.

Some people have suggested that these drops are due to crack smoking. This is not likely the case because over 60% of people who use injection drugs interviewed in 2003 and 2005 for the I-track study said that they also smoked crack (Vancouver Island Health Authority, 2006; Public Health Agency of Canda, 2006). In our study, Victoria was the only site where we heard reports of syringes being sold on the streets and some people reported reusing their own needles. Reusing needles can lead to abcesses and infections. People we talked to in the other three sites said they had no difficulty accessing syringes for free.

With the shift to mobile services, people often found it difficult to find the mobile vans and many found it difficult to walk to the new location outside of the downtown core (MacNeil & Pauly, 2008). The mobile service does reach some people who might not come to a fixed site, but a mobile service does not provide the same kind of confidentiality and connections to other services that might be needed such as nurses, doctors, and counselors. Having only mobile services, means that conversations and discussions are public because there are not confidential spaces for people to talk.

A report in 2000 recommended that Victoria should have both fixed and mobile services (Stajduhar et al., 2000; Stajduhar et al., 2004). In 2007, it was recommended that a city the size of Victoria should have three supervised injection sites. We are waiting for supervised injection services. In 2008, needle exchange services were reduced with mobile services replacing the fixed site. It is hard to understand why it is so difficult to put harm reduction services into place that are so clearly needed by people who use drugs in Victoria. We recommended in our report that Victoria

should have multiple fixed sites, supervised injection services and endorsed a distributed model of needle exchange.

In our research, we found through an analysis of police statistics that drug use did not disappear with the closure of the needle exchange but just shifted to other areas, relocating drug use into other neighbourhoods (MacNeil & Pauly, 2008). The current situation is placing everyone in the community at risk. Increased police activity combined with the closure of the exchange is likely to drive drug use underground and increase harmful effects of drug use.

Needle exchange services are essential health care services according to the World Health Organization (WHO, 2009). Needle exchange services should go hand in hand with connections to other services such as housing, income and supports (MacNeil & Pauly, 2008). HIV risk is increased when people do not have stable housing (Corneil et al., 2006; DesJarlais, Braine & Friedmann, 2007; Elifson, Sterk, Theall, 2007). Needle exchange services are part of a comprehensive approach to health and well being for everyone in the community and are part of a plan to end homelessness. There is no time to wait – we need them now.

Both Bernie and Joan are nurses and Assistant Professors in the School of Nursing at the University of Victoria.

Corneil T, Kuyper L, Shoveller J, Hogg R, Li K, Spittal P, et al. (2006). Unstable housing associated risk behavior, and increased risk for HIV infection among injection drug users. Health Place, 12(1):79-85.

DesJarlais D, Braine N, Friedmann P. (2007). Unstable housing as a factor for increased injection risk behavior at US syringe exchange programs. AIDS Behavior, 11, S78-S84.

Elifson R, Sterk C, Theall K. (2007) Safe living. The impact of unstable housing conditions on HIV risk reduction among female drug users. AIDS Behavior, 11:S45-S55.

MacNeil, J. & Pauly, B. (2008). Reaching Out: Evaluating Outreach and Needle Exchange Services on Vancouver Island. Final Report for AIDS Vancouver Island. Available from joanm@

Public Health Agency of Canada (2006). Enhanced Surveillance of risk behaviors among injecting drug users in Canada. Ottawa: Author. Available online at www.phac-aspc.gc.ca/i-track/sr-re-1/pdf/ itrack06_e.pdf.

Stajduhar, K. Poffenroth, L. & Wong, E. (2000). Missed opportunities: Putting a face on injection drug use and HIV/AIDS in the capital health region. Vancouver, BC: British Columbia Centre for Disease Control.

Stajduhar, K., Poffenroth, L., Wong E., Archibald, C., Sutherland, D., Rekart. M. (2004). Missed opportunities: Injection Drug Use and HIV/AIDS in Victoria, Canada. International Journal of Drug Policy, 15, 171-181.

Vancouver Island Health Authority (2006). I-track study: Enhance Surveillance of risk behaviors and prevalence of HIV and Hepatitis C among people who inject drugs. Victoria, B.C.: Author.

World Health Organization (2009). PRIORITY INTERVENTIONS: HIV/AIDS prevention, treatment and care in the health sector Geneva: Author. Available online at www.who.int/hiv/pub/ priority_interventions_web.pdf

Your Residential Tenancy Rights

By Ilana Teicher and Rose Keates

The Law

Landlords must respect the Human Rights Code when assessing people's applications for tenancy. Possible tenants can't be discriminated against because of the race, colour, religion, marital status, family status, physical or mental disability, sex, sexual orientation, age or lawful source of income. By law, landlords can't use a "minimum income" requirement to decline an application. They also can't decline an application because someone is on welfare, or has another source of income the landlord doesn't like.

Some landlords do use income criteria in ways they are not supposed to, like discriminating against a welfare recipient. If a landlord's requirements seem out of proportion, or unrealistic, or if they are impossible for a lower income tenant to meet, that person may have a valid complaint.

Landlords are allowed to look at credit reports of someone who applies to be a tenant and can decline someone's application if they have poor credit. Even without a credit card or other loan you may have a credit history based on bills or other payments you've been responsible for. Michael Drouillard, author of "Landlording in Canada" says that landlords want to make sure that renters can afford the rent that they will owe.

What to do

1) If you have a complaint: File a complaint under the BC Human Rights Code if someone discriminated against you in a way that is against the law. To make a complaint you need to fill out a Complaint Form and file it with the tribunal. For more information, or for complaint forms call the BC Human Rights Tribunal at 1-888-440-8844 or visit www.bchrt.bc.ca.

You can also contact the B.C. Human Rights Coalition, which is in Vancouver, by phone at 1.877.689.8474 or visit www.bchrcoalition.org. They provide legal information and other support for people with complaints.

OTHER HELP:

The Law Centre Third Floor-1221 Broad St. Victoria, BC V8W 2A4 Phone: (250) 385-1221

Western Canada Society to Access Justice Phone: (604) 878-7400 or visit www.accessjustice.ca

2) To find out about your credit history: Check your credit history to make sure it has no mistakes. Anyone can get a free credit report. You can order your credit history report by calling 1-800-465-7166 between 5:00 am and 2:00 pm or mailing:

Equifax Canada Inc. Consumer Relations P.O. Box 190 Station Jean Talon Montreal, Quebec H1S 2Z2

Visit www.econsumer.equifax.ca/ca/main for more information on how to access your credit report. The Industry Canada website also has more general information and help about credit reporting: www.ic.gc.ca/eic/site/oca-bc.nsf/eng/ca02179.html.

PBSC-UVic is a student organization that is not able to give legal advice. This article is intended as legal information only. Should you have a specific legal problem, it is advisable to consult a lawyer. Special thanks to Irene Faulkner of Underhill, Faulkner, Boies-Parker for her assistance. For more information on our organization, please visit: www.pbsc-uvic.ca.

The UVic Chapter of Pro Bono Students Canada (PBSC) wants to help answer some of your questions about the law. If you'd like to suggest a topic, please drop ideas off at Street Newz's mailbox at 1027 Pandora Ave. or email us at pbsc.articles@gmail.com.



April 4th: a polite march and demonstration started at Centennial Square and ended at the Legislature Building. Its purpose was to call attention to the need for housing policies to alleviate homelessness. I noticed a spectrum of political hues ranging from church groups (who organized it) to advocates for tents, tarps and the right for people to provide shelter for themselves. *Pete Rockwell*

Introducing Patricia

My name is Patricia Pocock, and recently I joined the crew of Street Newz.

My husband died in December 2008. Without his income to help pay the rent on my one bedroom \$800 a month apartment, I was facing eviction and homelessness. I searched desperately for a job. But there aren't many people willing to hire a fifty four year old disabled woman.

When I approached *Victoria Street Newz* they were kind and understanding. Thanks to them, I now have a light of hope in my soul. The first day I started selling the paper, I realized Victoria is full of people with warm and caring hearts. And I bless and thank you. You are making a difference for those of us who sell this paper. And to the charities it supports.

Many of you gave me a gift by telling me a little about your own struggle to maintain in your own lives. It would be wonderful if you could write and submit your stories to *Street Newz*.

Things need to change. Those that run our government need to hear all our voices. Poor, middle class, we deserve to be heard. We deserve quality of life. We are all gods' creations. Why should so many suffer stress and despair, and so few prosper, wallowing in more luxuries than they need?

Politicians, when you lay down to sleep at night, spare a thought to those of us who can't sleep, kept awake by our worries. Rent hikes (if we are lucky enough to have a home), food prices (when we can afford to eat). Spare a thought to the amount you are allowing those below the poverty line to live on. I challenge you to try and live on what you allocate for the disabled, and Ministry recipients.

To close, I'd like to thank Spinnakers in West Side Mall Esquimalt for allowing me to sell papers at their store.



The Advocate: Election E-Chat

by W. Robert Arnold

In just a few days we are going to the polls to vote for members of the Legislature, some of whom will form the government and some will form the loyal opposition. The job of the government is to make laws that are good for the people of this province and the job of the opposition is to make sure the government actually does its job.

In the past eight years, or so, the government has made laws that have seldom been good for anyone but the rich friends of the premier and his class. Meanwhile the opposition has done very little to make the government responsible for the laws it has made.

Hopefully, the next government will care more about ordinary folks and less about lining the pockets of the already rich. Hopefully, the next opposition will do their job. What we need is integrity. We need politicians who will do what they promise before the election.

We need to instruct our politicians about what we want them to do, not suggest, not plead, not beg them. We need to let them know that if they do not do what we want them to do we will get rid of them at the nearest opportunity. To do this we need to show them we have the power to do it. We can start by telling them of our intention and commitment to this course of action.

Intention can be very scary to politicians. Knowing there are a whole bunch of people in their constituency who are willing to work for the next four years to unseat them if they don't comply will exert a certain influence on their decisions. Knowing that there are a whole bunch of people watching what they do for the next couple of years will make them think twice before they do anything that goes against our interests.

We need a voice. We need to organize so that the voice represents a whole bunch of us. If we communicate to our members of the legislature as individuals, they can ignore us. If we communicate as a large group, they must pay attention.

We need firstly to call or email the candidates in our own constituencies and tell them we are going to be watching and organizing and communicating with them on a regular basis should they win their seat. They need to know that we will be asking them for regular updates about what is happening in the Legislature. They need to understand that we will be giving them our position on issues so they will know what they should be doing in their jobs. We will be helping them do their jobs better.

Finally, we need to agree on our positions and on our instructions to the MLAs. We can do this by creating a website where we can share our thoughts and communicate with each other. This could be a place where we could meet, talk, and organize. We need to do this as quickly as possible if we are to have any powerful input before the main 12th election.

I would like to put a small team of people together to create this website. We need people with communication skills, Internet websites skills, and people with enthusiasm for this idea. If you are willing to become involved in this effort please e-mail me at greyknight@shaw.ca. I am hoping to put a

meeting together within the next week. The poor need a voice and we can help.

Robert is a 67 year old man who has fought poverty, his own and others, for over 45 years



Harm Reduction What is it?

by Larry Wilkinson

I have been hearing the term "Harm Reduction" thrown around a lot recently. It is a philosophy that has been around for a long time. But what is it?

The Police say they practice "Harm Reduction." I read articles in newspapers that say it's all about enabling drug use, and how it runs counter to legal precedents. I hear people complain about "those junkies," like they are some kind of particularly irritating animal. It is easy to forget, from my warm, comfortable apartment, with a fridge full of food, surrounded by a loving family, that a lot of people haven't been so lucky.

But I will never forget what it was like when I was one of those people so many of us love to hate. My story, the one I have told countless times before, sounds a lot like the ones you'd hear if you spent a little while talking with someone who suffers from an addiction. Pick anyone off the street, and you'd start to see a pattern: family problems, like abuse and neglect; mental disorders; unimaginable suffering.

I lived a pretty 'normal' life. I was regularly on the honour roll at school; I got a job that I was good at. And I was miserable. The first thought that crossed my mind when I woke up in the morning was whether or not that would be the day I'd finally commit suicide. So like anyone in pain, I looked for a solution. It ended up being at the bottom of a bottle and inside of a needle.

Addicts don't usually think very highly of themselves. That's why they start using in the first place. Harm Reduction is a way of treating people with the dignity they deserve, showing them the compassion that is so sorely lacking in their lives, and at the very least, keeping them safe.

It took many years for me to commit to working toward a better life, and that work was really, really hard. That work will never be done, but I feel like I've made it. Looking back, it's funny. I had people trying to help me all the time. "Just stop," they'd say. There was a doctor I saw, after one of my many blackouts, who convinced me to get help. I was dirty, battered and bruised, covered in track marks, and this guy shook my hand when I entered his office. He knew what was going on, but he didn't judge me, he didn't get all preachy. He just said he could see I was in a lot of pain and that when I was ready, he would help me get well again. The next day I was out using again, but I remembered that man, and the humanity of his approach. When I was ready, I came back to him, and he sent me off to get treatment.

So maybe Harm Reduction is about treating addicts like sick people rather than criminals.

It involves changing the way we look at people around us, and exercising what is unfortunately an uncommon amount of compassion, sympathy, and perhaps even empathy.

I heard someone say that shooting up feels like a warm hug. Sometimes that's all it takes.

Larry Wilkinson graduated from the Free University courses offered at UVic. He's now attending Camosun College part-time, working on a Social Work degree. When there's time, Larry volunteers in the area of mental health and addictions.

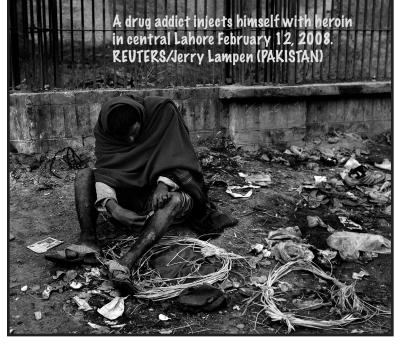


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BY WOODSY



Feeding the Monster

by Brian Mason

"Our insatiable demand for illegal drugs fuels the drug trade." U.S. Secretary of State Hillary Clinton (BBC News, March 5, 2009)

Imagine a government that wants to do good for its people, consulting widely, and wisely considering the evidence before it adopts a particular social policy. Imagine a government that wants to properly care for its citizens. Imagine a wise government, neither beholden to interest groups, half-baked ideologies, or dogmatic principles. Imagine, as a minimum, a government that doesn't intentionally harm its citizens. Imagine, finally, a government taking into account the actual consequences of its laws and policies.

Now consider Canada's drug laws in contrast to the enlightened approach of such an imagined government. They've been a disaster. Each amendment – always for a more punitive approach – has made the situation worse. We now have 1920s-style gangland violence as one of the crowning achievements of these dismal laws – with a whole segment of society criminalized. It's a national shame.

I believe it was the French philosopher Jacques Ellul who observed that it is not the bad drug trips that worry society, but the good ones – and for good reason. Our technological-rational-efficient capitalist society, in order to function well, requires a servile, uncritical citizenry. Mass media and advertising have been serving this up reliably. But the users of recreational drugs, which provide a temporary escape from this numb reality, can no longer be depended on to play by the rules. They might chafe at the nine-to-five job routine. New realities and new relations induced by drugs in an alienated population would be threatening to peace, order and good government – or so the thinking has gone.

Government, however, is highly selective in what it chooses to declare off-limits. Just consider, for starters, the history of opium, cocaine, and LSD, going from legal to illegal by various paths. In contrast, the legal psychotropic drugs marketed by Big Pharma, designed to bring people back to social routine, are welcomed and financed by capitalism precisely for that reason. Though they are over-prescribed, frequently abused and sometimes highly addictive, they help get people back on the treadmill.

Alcohol, one of humanity's oldest escape valves, has gone through cycles of social rejection and acceptance in Canada, but has emerged triumphant as the drug most widely embraced – and damaging – in our society. It's one of the chief lubricants of capitalism, the Grey Cup enduring as Canada's national drunk-fest. Drunk drivers continue to get off lightly. One of them is even our premier, re-elected in spite of his Hawaiian mug shot. Imagine had it been

cocaine or crystal meth in his bloodstream while he was weaving down the road – ballots may have been cast differently in the subsequent election.

Whatever and whomever a society chooses to demonize and scapegoat is arbitrary and changeable, though not without social utility. The results are always tragic for the chosen target. When it was wolves, we put a price on their head and hunted them mercilessly. When it was "Indians" we put them on reserves and followed up with cultural and linguistic genocide. When it was Jews, we wouldn't let them join our clubs or live in our neighbourhoods. Tellingly, societies have always needed their outcasts as a way of justifying their self-proclaimed superiority and exclusivity. These days, it is drug sellers – the so-called traffickers, pushers and dealers of the illegal drug trade – and to a lesser extent the users of illegal drugs, whom we abominate.

Successive Canadian governments are responsible for today's mess. First, certain drugs were haphazardly made illegal under various renditions of the Narcotics Control Act, the Food and Drug Act and now the Controlled Drugs and Substances Act. These actions set the stage early on for dealing with the matter almost exclusively through law enforcement. Scary government propaganda about the selected drugs soon followed. It permitted a simple argument to be made: if certain drugs were bad, then users and sellers of these products were bad people. Once someone was demonized in this way, it became easy to heap punishment and social exclusion on them. No enforcement strategy thereafter was too extreme, and getting more cops became the norm. Paradoxically, the more we have demonized sellers and users the bigger the problems we have created for both ourselves and them.

Bad policy, worse laws and laughable propaganda, which gave birth to this monster in the first place, have kept it well fed and growing. But it's never actually been a problem of dangerous drugs, unfortunate users and evil traffickers. From the beginning, it's been a tragic situation deliberately set up by destructive government policy. Now, all the police, courts, tough enforcement and lengthy prison sentences in the world won't make it go away. (This may come as a surprise to Stephen Harper.) Trying to control certain desired mood-altering substances by severely criminalizing their sellers as well as their users, often the same people, has served only to create a large and growing criminal subclass of society – with an army of enforcers pitted against it. Huge profits and lucrative livelihoods on both sides of the line are at stake. Judged by any standard, it's an insane predicament. All of which has been said many times before.

The way out of this impasse is stupefyingly simple: decriminalize drugs (as Portugal did in 2001) and adopt sensitive drug policies not based on a punitive model. In so doing, of course, we'd have to ignore the reproachful fuming of the United States.

Submitted by Brian Mason, a writer and philosopher living in James Bay.

Harm reduction in Victoria: what does it mean and what are we doing with it?

by Mark Willson

City council's recent nod to harm reduction and a fixed-site needle exchange in its list of seven strategic priorities invites some uncomfortable questions of what's been accomplished since the city's initial endorsement of harm reduction way back in April 2004. What's happened in the last 5 years? You can get a quick sense by comparing the priorities of April 2004 against those of March 2009:

Council's current harm reduction priority involves a commitment to "consider findings of VIHA-led committees on locations for fixed sites." In 2004, of course, a fixed-site needle exchange wasn't included in the list of harm reduction priorities—because we already had one. Instead, the 2004 endorsement of harm reduction showed a strong interest in setting up a Safe Injection Site, with a "public education and a public consultation process for safe injection sites" and an aim to provide "support services in close proximity to safe injection sites."

Why have safe consumption sites (SCS) fallen off the agenda? It's not that the research has changed. When city council was speaking openly and loudly about SCS five years ago, it was in response to acclaim around Vancouver's Insite, and to two local reports recommending these services as key components of harm reduction services in Victoria. Five additional reports outlining similar recommendations have been released since then, the last two in 2007. (These reports are a good read: for those with computer access, they're listed below. Most of them will come up easily with a search).

If not the research, the Federal government's hard-line stance against harm reduction and refusal to grant the legal exemption used to get Insite going might be offered as a reason for the current shift in focus away from SCS. The problem with this reasoning is that the unlikelihood of gaining a legal exemption is used to imply that municipal SCS initiatives cannot happen.

Insite's recent legal victory against the Federal government, which found that the Federal ban on possessing controlled substances cannot be used to deny essential health care services to addicts, suggests the opposite.

According to the courts, this type of care is a charter right to 'life, liberty and security of the person' that the Federal government cannot interfere with (search 'Pitfield,' or 'PHS Community Services v. Attorney General of Canada, 2008'). For sure, the federal government is challenging this ruling, with an appeal beginning as soon as next month. But far from the impossibility of local action, this really only tells us one thing: that working towards SCS, and a harm reduction approach more generally, requires concerted, committed and innovative action under uncertain conditions. And isn't this something we already know, as well as something that seems at the heart of all the talk around harm reduction?

Part of the problem here, it seems, is ensuring that harm reduction doesn't simply become a branding exercise, used to make policies sound innovative, new and exciting while offering more of the same. The city's current 'harm reduction priority' to regain needle exchange services the city has had since 1988 is a case in point—what is the distinctive contribution offered by the philosophy of harm reduction here?

To make sense of this problem, harm reduction might be understood as an 'essentially contested concept' that, like democracy or rights, can be defined in a way that makes it pretty much meaningless or in a way that offers the potential to change the way we think and act. A key thing here is that the meaning of harm reduction is something that has to be struggled over, in an ongoing resistance to its institutionalization and loss of content.

The city's definition of harm reduction has been notably loose, ranging from 'four pillars' language in the 2004 endorsement to an emphasis on the "reduction of risks and harmful effects associated with substance use" in the 2007 Mayor's Task Force. This looseness has no doubt helped gain broad community support as harm reduction is allowed to mean something different to each person who hears about it. A big risk is that this appearance of agreement actually prevents important debates and discussions from happening, reducing the chance of building the common ground needed to get difficult and innovative projects underway.

An equally big risk is that this conceptual looseness fails to place checks on how the various forms of 'risk and harmful effects' experienced within Victoria are weighed against each other. All too often the interests of drugusers, those who face the worst of the risks and harmful effects to be dealt with, are secondary to a range of risks and harms perceived by more powerful and organized community groups and organizations—which contributes, no doubt, to inaction on the more effective and demanding harm reduction initiatives such as the SCS.

If the difficult work of setting up a SCS is going to get done, the equally difficult work of disagreeing and struggling over the meaning of harm reduction will have to happen. One of the most important points to struggle over is one of six broadly accepted international principles of harm reduction: Drug User Involvement. It's important here to distinguish the principle of drug user involvement, which involves being a partner in problem-identification and decision-making processes, from talk of 'client-centred' choices of services that drug-users have no part in creating. A recent BC Ministry of Health outlines the drug user involvement model well:

"The active participation of drug users is at the heart of harm reduction. Users are seen as the best source of information about their own drug use, and are empowered to join with service providers to determine the best interventions to reduce harm from drug use."

Given this, it might be argued that it just isn't harm reduction if drug users aren't actively involved in local decision-making processes. For sure, this

involvement should play a key role in re-invigorating SCS initiatives aimed at addressing the unnecessary harms and indignities faced by drug users, and in assisting city officials in tying the harm reduction brand of innovative policy-making to the difficult work of implementing its more challenging projects.

Key policy sources:

Feasibility Study on 'Supervised Drug Consumption' Options in the City of Victoria (2007); Mayor's Task Force on Breaking the Cycle of Mental Illness, Addictions and Homelessness (2007); I-TRACK Surveys (2006); Closing the Gap (2006); Fitting the Pieces Together (2005); Serving the homeless: Social agencies in "the red zone" (2003); Missed Opportunities (2002)

Mark Willson is a doctoral student at UVic and a researcher with Harm Reduction Victoria.

On March 24, 2009 soldiers captured drug kingpin Hector Huerta Rios at the air force base in Salinas Victoria, on the outskirts of Monterrey, northern Mexico. Huerta Rios was seized along with five persons, weapons and money at his car dealership.

Interestingly, the announcement came hours before U.S. Secretary of State Hillary Clinton arrived in Mexico promising to do more to help Mexico crack down on drug violence that is spilling over into the U.S.

photo: REUTERS/Tomas Bravo



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Saturday Sunday 10:00am - 5:30pm
 1pm - 5pm

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From the people who use the Needle Exchange ... compiled by Emily Beinhauer

"It would be nice to have it go back to the way it used to be when we had a place in town where we could have a cup of coffee, have a cup of tea, pick up our new ones, dispense our old ones, talk with a street nurse or counsellor. Now sure the counsellors are there, the street nurses are there, but they're so overwhelmed that there is not much time to have talks like we used to. It would be nice to back to the way it was...to a couple of years ago... it would be nice to see it all go back to the way it was."

"The way I see things, the closure of the needle exchange and the no-go zone means people do not having accessibility to clean syringes. This could present some huge health care costs a few years from now because HIV and Hep C are going around. ... People don't like seeing the problems. So many high tax payers would like it swept under the rug."

"I think it is a crime that the needle exchange has closed when VIHA has said that they are trying to get a 50% reduction in HIV and Hep C, and by the needle exchange closing there will be no reduction. There will be an increase."

"I don't see any point in [closing the needle exchange]. I would rather that things just went back to usual and everything would get done a lot easier I think, without any trouble at all."

May 09, Volume 6 #2

Drug addiction is one of the problems of modern life that few people seem able to think straight about. Lately there has been some debate about needle exchange programs in several Canadian cities, and a safe injection site in Vancouver.

On one side of the debate, or what passes for debate in this society, are the usual 'morality' upholders. Their basic line against injection sites and other forms of what is called 'harm reduction' is that it does not 'solve' the addiction problem.

This is true, but none of the approaches favored by conservative moralizers 'solve' anything or 'cure' addictions either.

To deal sensibly with the addiction problem, and it really is a problem in society, is to understand why people get addicted and what the real problem is with it. There are plenty of clues around about what causes some people to develop severe addiction dependencies and others to quit with relative ease or never start. It is about social status, environment, and dislocation.

science

In animal studies, the dominant monkeys are less effected by addictive drugs than the submissive ones. Being a submissive individual in a group of primates is a stressful life. As well, a more stimulating environment helps monkeys get off the drugs and stay off.

During the Vietnam war, much of the American army became opium addicts. There were fears

about the home front being invaded by an army of discharged drug addicts. But when these soldiers were removed from the war, their addictions mostly disappeared.

Humans and monkeys also bounce back quickly from addictions when the life stress that is causing their addictions go away. Addictions do not cause permanent damage. Further, addictions are time limiting; eventually the addict cannot get high no matter how much he or she consumes, and the addiction has run its course.

sense

What destroys drug addicts is the way their addiction causes them to live. When they are not starving themselves and spending every waking minute trying to get together the money for the next hit, they can usually hold some sort of job. Some drugs are more problematic than others in this regard and many addicts are bad neighbors and bad company.

In the United Kingdom, for over forty years, heroin addiction was dealt with as a health problem. Addicts who were unable to withdraw from it could get heroin by prescription. Then the number of addicts suddenly started to climb.

With typical moralizer's logic, this was taken as evidence that this way of dealing with addiction was a failure. It was in fact a sign that something had started going wrong in that society, to suddenly produce all these new addicts after a long period of stability.

Since 1994 the Swiss have run a prescription heroin program and have had great success at reducing the harm of heroin addiction. Yet in many places the approach of the moral upholders still prevails; forced 'treatment' of addicts. That this has nothing to do with solving the actual problem does not perturb the certainties of the moral fantasizers.

delusion

But the 'harm reduction' approach also has little to do with the real problem and much to do with making its proponents feel good. To Canadian harm reducers, the safe injection site is the holy grail. They seem unable to even hope for decriminalization of the possession of needle drugs.

Providing the addicts with needle exchanges and safe injection sites is sweet and thoughtful, and cheap. What the addicts really need are safe places to live and a supply of safe drugs. This costs some money and requires shutting up the moralizers, so it is not going to happen any time soon.

The pain, stress, and dislocation caused by our present socioeconomic arrangements will not soon pass away. Sanctimony from moralizing conservatives and idealizing progressives, who think they have the answers, will long be with us.

And the "poor, pathetic junkies" will continue to die.

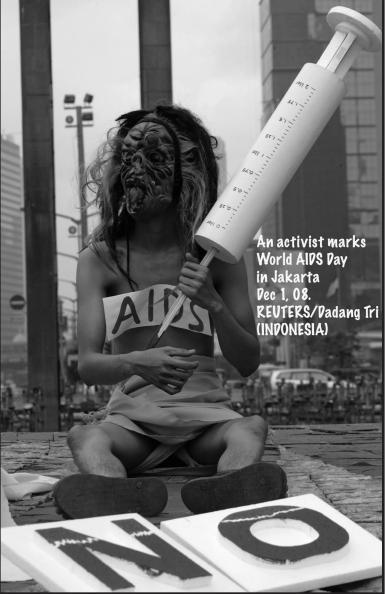
References:

- www.jointogether.org/news/headlines/inthenews/2006/study-says-vancouver.html
- www.scienceblog.com/community/older/2005/11/200510539.shtml
- en.wikipedia.org/wiki/Heroin#Heroin_prescription
- www.cfdp.ca/roots.pdf

Tim is an Alberta born life long trouble maker and useless eater now living on a disability pension in central Toronto. Tim writes at www.qaz.ca/racoon.html.

Look at Addiction

by Tim Rourke



Another | S.O.L.I.D. Peers. Helping Peers.

by Kim Toombs

Every morning at 7 am, dedicated members of the Society of Living Intravenous Drug Users (SOLID) are out providing outreach, needle distribution/exchange, needle pick-up and education to their fellow community members.

Whether you inject it or smoke it – currently or in the past, and as long as it's illicit (except pot), you are an automatic member of SOLID. SOLID exists to support and educate its membership because it is run by people who use/ed drugs and the board is dedicated to making it an accessible and welcoming organization.

Two of the main components to SOLID's mandate are education and advocacy. With the support of the Community Council, SOLID received a United Way grant to provide Peer Education to its membership. These weekly sessions are training 20 of SOLID members to recognize signs of infection including HIV and Hep C, to learn safer injecting and smoking techniques, self advocacy for housing, healthcare, and finally some practical self care tips. This education attempts to provide strategies to reduce many of the harms people experience when they are using illicit drugs, are homeless or under housed, and experience extreme difficulty accessing appropriate health care. This knowledge will also vastly increase the quality of peer outreach that SOLID

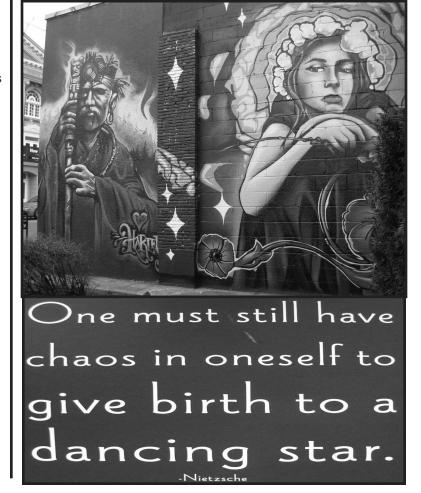
SOLID members involved in organizing the training recognize that "self advocacy" can be a fairly impractical term when you have no rights due to the stigma and discrimination associated with drug use. The advocacy skills and education must have a non-traditional, practical angle to ensure that the skills will actually be useful for the participants.

Teaching each other how to smoke crack safer and inject safer is an example of practical skills. This knowledge can drastically lessen the amount that people are forced to seek emergency health care - and the less people who use drugs have to come in to contact with a healthcare system that is not prepared to work with them in a respectful and practical manner, the better. The trainings are also providing constructive relationship building between community health care workers (i.e. Cool Aid Community Health Nurses) who can be an effective bridge between someone who needs hospital care or other health care and the system itself.

The trainings will be finished in May, followed by a large peer forum and community event. Once the trainings are complete we will have a newly educated, peer based army looking for places to use their skills. SOLID hopes to continue to build capacity to provide opportunities for members to share their knowledge and skills with each other.

For more information or to contact SOLID call 250-298-9497 or email solidinfo@shawbiz.ca.

Kim Toombs is an activist and harm reduction advocate. She works for SOLID as the Programs Coordinator and is currently helping to organize the peer training.



Exclusive Opinion Poll: 2009 Provincial Election: Part Two

NDP Leading in Victoria and Esquimalt

by Gordon Pollard

The NDP appears headed for a landslide victory in Victoria-Swan Lake in the May 12th provincial election and will also likely win, but by a smaller margin, in Esquimalt-Royal Roads, according to the results of an exclusive public opinion survey carried out for *Victoria Street Newz*.

The poll shows incumbent NDP MLA Rob Fleming has a huge lead in Victoria-Swan Lake while another NDP incumbent, Maurine Karagianis, has a smaller but still fairly comfortable lead in Esquimalt-Royal Roads.

It appears Green Party leader Jane Sterk is not going to win a seat in the legislature. In the Esquimalt-Royal Roads poll, Sterk is in third place, 27.6 points behind Karagianis and 13.6 points behind B.C. Liberal candidate Carl Ratsoy.

The other party leader running in Greater Victoria, Carole James of the NDP, will likely be re-elected in Victoria-Beacon Hill, according to the results of an earlier poll published in last month's *Street Newz*. James was leading Dallas Henault of the B.C. Liberals by 22.4 points and Adam Saab of the Green Party by 46.4 points.

A random sample of 750 decided voters were polled by telephone in the Street Newz survey (250 each in Victoria-Beacon Hill, Victoria-Swan Lake and Esquimalt-Royal Roads). We used a "generic" Green candidate in Victoria-Swan Lake since the Greens had still not chosen their candidate for that riding by April 4th, the deadline for completion of our polling project.

In Victoria-Swan Lake, Rob Fleming (NDP) received 150 votes (60.0 per cent) while Jess McClinton (B.C. Liberal) got 68 votes (27.2 per cent) and the "generic" Green candidate 21 votes (8.4 per cent). Eleven voters (4.4 per cent) said they would support independents or smaller parties (including the B.C. Conservative Party, the Communist Party and the Western Canada Concept).

An additional 26 voters (9.4 per cent of the overall total) said they will vote but have not yet decided which candidate to support.

It is expected about 26,000 voters will cast ballots in Victoria-Swan Lake on May 12th. Projecting vote totals on the basis of the trend in the poll, Fleming will likely get between 14,500 and 16,500 votes, McClinton between 6,000 and 8,000 and the Green candidate between 1,500 and 3,500.

Fleming, 36, won the Victoria-Hillside seat by 6,884 votes over Liberal Sheila Orr in 2005. He was active in student politics at UVic and served two terms on Victoria city council before running for provincial office. His 27-year-old B.C. Liberal challenger Jesse McClinton was also a student politician at UVic and for the past few years has worked in advertising and marketing in Vancouver and Victoria.

In Esquimalt-Royal Roads, Maurine Karagianis (NDP) obtained 116 votes (46.4 per cent) while Carl Ratsoy (B.C. Liberal) got 81 votes (32.4 per cent) and Jane Sterk (Green) got 47 votes (18.8 per cent). Six voters (2.4 per cent) said they would support independents or smaller parties. This group included one diehard supporter of the once mighty but now miniscule B.C. Social Credit Party.

In addition, 38 voters (13.2 per cent of the overall total) said they have not yet decided which candidate they will vote for.

It is expected about 27,000 votes will be cast in the Esquimalt-Royal Roads in this election. Projecting vote totals from the poll results, Karagianis will likely get between 11,500 and 13,500 votes. Ratsoy between 8,000 and 10,000 and Sterk between 4,000 and 6,000.

Karagianis, who served for nine years on Esquimalt council, won the Esquimalt-Metchosin seat by 2,895 votes over Liberal Tom Woods in 2005 after losing by 3,286 votes to Liberal Arnie Hamilton in 2001. Challenging Karagianis, in addition to Green leader Jane Sterk, is B.C. Liberal Carl Ratsoy, a teacher at Reynolds Secondary School, who has lived in the area for 22 years and has been active in a number of community organizations.

Both Victoria-Swan Lake and Esquimalt-Royal Roads are new, or at least newly-named, ridings created by last year's redistribution of provincial electoral boundaries, which has increased the number of seats in the legislature from 79 to 85.

Victoria-Swan Lake takes in about 85 per cent of the former Victoria-Hillside constituency but its northern border has been extended further into municipal Saanich so it now includes (appropriately enough) Swan Lake. The riding's western boundary has also been extended

Victoria-Swan Lake Street Newz Poll

Rob Fleming (New Democrat)	60.0 %
Jesse McClinton (B.C. Liberal)	27.2 %
Candidate To Be Announced (Green)	8.4 %
Others	4.4 %

Victoria-Hillside 2005 Election

Rob Fleming (New Democrat)	57.0 %
Sheila Orr (B.C. Liberal)	28.8 %
Steve Filipovic (Green)	12.0 %
Others	. 2.2 %

from Tillicum Road to Portage Outlet.

Esquimalt-Royal Roads basically encompasses Esquimalt Township, Victoria West, Colwood and View Royal. But, unlike the former Esquimalt-Metchosin riding, it doesn't include Langford, which now becomes part of the new Juan de Fuca electoral district.

Looking at the overall pattern of the *Street Newz* poll results, it seems this election will likely be quite different from the 2001 and 2005 elections, in which powerful winds of change swept through these ridings as well as the rest of the province. It appears this time it is going to be much more of a stand-pat election.

All three of the ridings flipped from the NDP to the Liberals in 2001 but then flipped back to the NDP in 2005. This time it seems very unlikely there will be a turnover in any of the three constituencies.

In assessing the results of the Victoria-Swan Lake poll, no one should be surprised by the numbers. Over the past four years, Rob Fleming has developed a strong organizational base in the former Victoria-Hillside riding, making it one of the safest NDP seats in the province.

Even Martyn Brown and the B.C. Liberals' other head honchos are aware that, realistically, Jesse McClinton has about as much chance of winning Victoria-Swan Lake as one of the Tally Ho horses would have of winning this year's Kentucky's Derby.

The Greens can take some comfort that their "generic" candidate at least maintained a foothold in the riding, but the party's 8.4 per cent share of the vote is down from the 12.0 per cent obtained in Victoria-Hillside in 2005 by Green candidate Steve Filipovic and it is far less than the 19.8 per cent share which the party's candidate Stuart Hertzog got in 2001.

Moreover, the fact the Greens had still not nominated a candidate in Victoria-Swan Lake by April 4th -- just 38 days before the election -- clearly doesn't augur well for the party's chances on May 12th. In fairness to the Greens, however, it should be noted it is always difficult for any party to find a candidate in a situation in which that candidate is almost certainly marching off to the political abattoir.

As for the poll results in Esquimalt-Royal Roads, they are generally good news for the NDP's Maurine Karagianis. Even though her share of the popular vote appears to have dropped by 3.2 points since the 2005 election, her margin over the Liberals seems to have actually increased a bit, from 11.4 per cent to 14.0 per cent.

But while the Liberals will not be particularly happy about the poll results in Esquimalt-Royal Roads, they realize, realistically, the party has very little chance of winning in that riding. Indeed, over the past 30 years, Esquimalt voters have opted for the NDP in every election except one (in 2001 when Arnie Hamilton won the seat for the Liberals).

The party most disappointed by the poll results in Esquimalt-Royal Roads will be the Greens. Though party leader Jane Sterk does seem to be gaining some votes at the expense of both the NDP and Liberals in the constituency, she still remains well behind both the NDP and Liberal candidates.

Moreover, the 18.8 per cent share of the vote Sterk got in the poll is considerably lower than the 25.8 per cent that previous Green leader Adrian Carr obtained in her home riding of Powell River-Sunshine Coast in 2005.

Nonetheless, Sterk could still pull the Greens' chestnuts out of the fire, so to speak, if she is able to turn in a very strong performance in the upcoming party leaders' debate.

Frankly, she desperately needs to have what has come to be known in B.C. politics as a "Gordon Wilson moment." that refers to the dramatic moment in the 1991 televised leaders' debate when then Liberal leader Wilson jolted the long-moribund Liberal Party back to life when he interrupted a squabble between Social Credit leader Rita Johnston and NDP leader Mike Harcourt, telling viewers they were seeing "a good example of why nothing ever gets done in Victoria."

As we noted in our April edition, respondents to

Esquimalt-Royal Roads Street Newz Poll

Maurine Karagianis (New Democrat)	46.4 %
Carl Ratsoy (B.C. Liberal)	32.4 %
Jane Sterk (Green)	18.8 %
Others	2.4 %

Esquimalt-Metchosin 2005 Election

Maurine Karagianis (New Democrat)	49.6 %
Tom Woods (B.C. Liberal)	38.2 %
Jane Sterk (Green)	10.6 %
Others	1.6 %

the Street Newz polls are not specifically asked to give reasons for their choice of candidate or party. Nonetheless, many voters in both Victoria-Swan Lake and Esquimalt-Royal Roads did offer comments and, not surprisingly, there was an out-pouring of anguish over B.C.'s deteriorating economy.

What is unusual in this election, however, is that so many voters on both the left and right sides of the political spectrum appear to be frightened of what might happen in the future largely because of what they have already seen happen in the past.

Many of the survey respondents who plan to vote NDP said they fear that if Gordon Campbell is re-elected he will revert to the hard-line right-wing agenda he pursued in his first term since he isn't planning to run again and will no longer have to worry about maintaining a moderate image.

On the other hand, many of those who plan to vote Liberal said they fear an NDP government might adopt the same kind of reckless, fly-by-the-seat-of-the-pants economic policies that Glen Clark's ill-fated administration pursued in the 1990s.

It might be said then (with further apologies to Charles Dickens) that this election could be largely a struggle between two "Spirits." We will find out whether B.C. voters are more scared of the Ghost of Glen Clark Part or the Ghost of Gordon Campbell Future.

Survey respondents had no shortage of criticism for both Carole James and Gordon Campbell, though the tone of the criticism was generally milder in the case of the NDP leader. Even many of those planning to vote Liberal said they think James is "a nice lady" but they feel she is "too weak to make a good premier" and "doesn't have enough understanding of economic issues."

By contrast, the negative feelings many voters expressed toward Campbell ran much deeper and were a lot more bitter and visceral. A number of survey respondents said they feel Campbell is "arrogant" and "out of touch with the lives of ordinary people." Some even described him as "nasty," "mean-spirited" and "untrustworthy."

Whatever might be said of Gordon Campbell, he clearly arouses passionate feelings among both his supporters and detractors. For example, one voter in View Royal said: "Gordon Campbell is the best premier B.C. has ever had." But another voter in Oaklands said: "I wouldn't vote for that jackass Campbell under any circumstances."

In any case, as we noted in our April edition, the historical odds favour Campbell since the NDP has won only three of the 21 B.C. elections the party has contested since 1933. And, even more ominously for Carole James, no femaleled party has ever defeated a male-led party, federally or provincially, in any election in Canadian history.

Nonetheless, even with several key factors working in their favour, the Liberals are by no means guaranteed of winning a third term. With the present economic crisis causing so much fear and confusion among voters, the political atmosphere in B.C. is very volatile, and it is quite possible we could see some big surprises in this election.

If the NDP pulls off an upset victory on May 12th, it will be mainly because there is still a huge amount of Campbellphobia churning in the guts of many lower and middle-income British Columbians.

If, on the other hand, the Liberals win re-election, it will be mainly because many British Columbians still haven't forgotten the fumbling and stumbling of the Glen Clark years and are not sure they can trust the NDP to steer the province safely through troubled economic times.

In either case, May 12th promises to be one of the most interesting days, and possibly one of the most historic, in the annals of B.C. politics.

Gordon Pollard, who carried out this survey, conducted opinion polls for Victoria Street Newz in the Victoria ridings for the 2005 provincial election and the 2006 and 2008 federal elections. All three polls accurately predicted the election results. Gordon is a native of Victoria and has a BA from the UVic and a MA from Columbia in NYC. After working as a journalist for 10 years in B.C., Alberta and Ontario, he spent 20 years teaching English and History in Nigeria, Sierra Leone, Zimbabwe and Sri Lanka.

Victoria Community Health Co-operative Community Wellness Clinics



by James Christian



Clinic Philosophy

The Community Wellness Clinic offers Co-op member-participants complementary treatments from various Co-op natural health practitioner members at a pay-what-you-can rate.

The clinics are held the third Sunday of every month creating the reality of increased access to integrated multidisciplinary health care in an affordable and inclusive way.

From doctors to integrated energy workers, from physiotherapists to hypnotherapists, massage therapists to homeopathic doctors, all practitioners are dedicated to working together to improve your health and wellness.

The donation money you pay goes into the Co-op Health Access Fund designed to support member participants access complementary health care modalities.

The practitioners are offering their services gratis to the community.

Here's how it works

1) Become a Member of the Victoria Community Health Co-operative

The Wellness Clinic is open to member-participants of the co-operative. You can either join the co-operative before the clinic starts or you can join the co-operative at the clinic itself. You can join the Co-op by visiting our website at www.victoriahealthcooperative.ca.

2) Choose Your Practitioner

Have a look at the biographies of the practitioners and what health benefits their modaility(ies) have to offer you. Decide what type of treatment you would like to try based on your current health concerns.

3) Set Up Your Appointment

Once you have decided on your practitioner call the VCHC telephone number (250-483-5503) to book an appointment. If you have any questions about what is right for you, you can talk to Nicole who is our volunteer health navigator or you can email or call the practitioner directly. Their contact information is included in their description.

Going to the Wellness Clinic

On the Sunday of your appointment come to the Community Wellness Clinic being held at Alembic Healing Arts Centre in Market Square, Suite #235, 560 Johnson Street at Store Street. The clinic is on the second floor and can be accessed from the Pandora Street entrance, as well. Please arrive 15 minutes before your appointment to fill in a medical history and sign a consent form. After your session, pay what you can, knowing that your donation goes towards helping to create a healthier community.

Continuing to Improve Your Wellness

Member participants are free to continue to work with the practitioners outside of the clinic. Arrangements can be made directly with the practitioner.

The Community Wellness Clinic seeks to establish relationships between member participants, strengthen the community of the VCHC and improve individual and the overall health of member/participants.



Reframing Our Pain

by Kurt Lenfesty

Physical pain can be divided into two components: nociception, which is the sensory experience, and the suffering, which is the emotional experience. When you stub your toe, there are nerves in your toe that are sending signals to your brain letting your brain know that something has happened to your toe. That is the nociception aspect. It is within your brain that you decide how to interpret that experience.

When we change the experience of pain, what we are trying to do is change the emotional effect of the sensations we are feeling. There are different ways we can make those changes. The traditional pharmaceutical approach is to dull the experience with drugs. But there are other approaches that work just as well, or even better. Approaches that are healthier and more life affirming. I'm going to focus on one way to change that experience through a process called reframing.

A friend had a broken arm and experienced pain as her arm healed. She understood that experience as one of suffering. Yet we can shift that experience around by understanding those sensations as healing as the bones knit together and nerves and other tissues grow together into wholeness again. With the change of perspective those negative sensations now become positive sensations. Instead of saying, "My arm feels so painful... it's terrible!" she can instead say, "I can actually feel my body healing step by step... it's wonderful!" The sensations don't change. The experience does.

Our choice in understanding the experiences we go through determines how we feel about them. When we think of the pains in our lives we CAN choose to change how we understand that experience. This is a really important point. You do have a choice in how you understand your experiences. You are the one in control of your perceptions of your journey through life. Can we understand the experience that we are going through, when we have those painful sensations, in a more positive light?

Let's go back to that stubbed toe. We could interpret that stubbed toe as a reminder that we're really clumsy. So every time those sensations travel up our leg through our spinal cord to our brain, we can be thinking, "Ah yes, I'm a total klutz." Or we can choose a more positive understanding and say to ourselves, "Ah, that stubbed toe is just a gentle reminder that I need to keep my feet connected securely with the ground and not get into too many flights of fancy."

How we reframe our experience can be a very creative process. And using our imagination to change that experience can actually distract us from those sensations that were bothering us in the first place. So while you're trying to think of how wonderful it is to have a stubbed toe you've actually forgotten about the toe itself! We often have little choice in the experiences that we go through, but with the power of our imagination we have almost unlimited choices in how we understand those experiences.

I realize that I've given some fairly simple examples. Our pains are often more complex and more severe. As a hypnotherapist I work with clients to help them change the understanding of their often quite complex experiences and put them in a more positive life-affirming light. And there are many other techniques that I use with clients to bring about pain relief. Please remember that all hypnosis is self-hypnosis and choosing how we understand those painful sensations through reframing is something that we all can do for ourselves any time that we wish to.

Kurt Lenfesty is a clinical hypnotherapist practicing on Cormorant Street. His work focuses on resolving past traumas, reducing stress and anxiety, pain relief and overcoming obstacles to life success. Kurt has found that hypnotherapy works quite well in dealing with emotionbased issues. All hypnosis is self-hypnosis and Kurt works to facilitate the natural ability contains within our own minds to achieve our highest potential. Kurt also practices foot reflexology (ah yes, the toes!), which is an excellent

way to relax and bring the body into balance. He can be reached at 250-884-9633 or by email at Kurt@TotalHypnotherapy.ca or by visiting his website at www. totalhypnotherapy.ca. Kurt is a board member of the Victoria Community Health Cooperative which can be found at www. victoriahealthcooperative.ca.





Harm Reduction Victoria (HRV) is a collection of Victoria area residents who advocate for public health services for people who use illicit drugs in Victoria, BC. We will work to obtain and realize justice and dignity for all drug users and

in particular those who suffer from homelessness, discrimination and violence as a result of their status as a person who uses drugs.

HRV is committed to on-going and broad community dialogue regarding the needs and deprivations of those who require harm reduction health services. HRV will use a diversity of means to ensure that the Capital Regional District adheres to the highest standards of Health Care for those who use illegal drugs.

We believe that **every person has the right** to consistent, non-judgmental, accessible health care and that harm reduction is an essential part of health care provision. As such, we will push for action regarding harm reduction policy and practice in Victoria.

HRV also advocates for the meaningful inclusion of people who use illicit drugs in the design, development and delivery of the health care services intended for them. We suggest that a renewed 'Four Pillars' approach be taken in addressing the harms related to illicit drug use, access to health services and addressing poverty: HOUSING, HEALTH CARE, SUPPORTS AND LIVEABLE INCOME.

HRV has many goals, including: Short term goals (immediate)

- 1. The immediate withdrawal of the 'No-Go Zone.' This arbitrary restriction of service delivery in an area that is undeniably well suited for harm reduction services is a serious threat to the health and wellbeing of Victoria's most vulnerable. We strongly recommend that the City petition VIHA and the BC Minister of Health, George Abbott, for the *immediate* lifting of this service delivery ban, and an action-driven negotiation process to find a solution that suits both the needs of those in need of these critical services and St. Andrews private school, which is at the nexus of this ban.
- 2. Fixed site needle exchange to supplement the existing mobile system. This model of service delivery has been recommended by numerous reports including the recent *Mayor's Task Force on Breaking the Cycle of Mental Illness, Addictions and Homelessness* (October, 2007). A fixed site needs to be in place in a location that is suitable to people that will use such a service.

Medium term goals (next 3 months)

A **Supervised Consumption Site** (SCS), as outlined in Benedict Fisher's Feasibility Study on 'Supervised Drug Consumption' Options in the City of Victoria (April, 2007), is the most rational and effective public service for those who use illicit drugs on Victoria's streets. SCS's have been widely acknowledged, both locally and abroad, to diminish, and sometimes eliminate, the ill effects of public drug use. It is our understanding from discussion with the Dr. Peter AIDS Foundation and nursing experts, as well as our review of the Code of Ethics that guides the nursing profession in BC, that a Federal exemption, like the one granted to InSite in Vancouver, is unnecessary as long as a qualified nursing professional is available for 'direct observation' while drugs are being consumed. In fact, the College of Registered Nurses of British Columbia supports providing clients with evidence-based information to safely give themselves intravenous injections as within the scope of registered nursing practice. This is further supported by the Canadian Nurses Association Code of Ethics which acknowledges that direct observation of the injection of illicit substances is an ethical nursing practice.

With this in mind we feel that supervised consumption rooms could be operated by existing downtown service providers. This will again ease the burden on the central fixed site needle exchange while providing a variety of locations and 'cultures' to ensure that all members of the downtown drug using community have appropriate access to life-saving and life-enhancing health services.

Long term goals (6 months to a Year)

Satellite services

- Comprehensive Harm Reduction Supplies must be administered in a variety of Victoria locations by existing service providers, clinics, and pharmacies. This will not only ease the burden on a central needle exchange, but will go towards serving a heterogeneous drug using population where they are at. HRV can assist with getting local service providers on-side.
- Hospital emergency rooms must be equipped to address the harm reduction needs of illicit drug users by providing harm reduction supplies

Programs and Services

- 24/7 nursing care in the downtown core
- City-wide crack pipe distribution program
- Intensify and strengthen peer intervention strategies
- Create and strengthen services that focus specifically on the needs of women and First Nations peoples
- Increase services in the downtown for the homeless, including showers, laundry, storage lockers, and restrooms

Detox

- Expand harm reduction based detox services, and lengthen the time in which people can stay at live-in rehab services
- Harm reduction based supportive housing for illicit drug users as part of the detox and stabilization process. Stable, supportive housing is a vital part of the continuum of care for illicit drug users and as such has a significant impact on reducing the use of illicit drugs.

For more information, meeting times or to leave comments, please contact us at www.harmreductionvictoria.ca or victoria.harmreduction@gmail.com

It's time to ask VIHA...

How many new cases of HIV are OK?

We say NONE!

Join us to put an end to apathy! Open a needle exchange NOW!!

May 31st @ 12 noon --- Pandora @ Vancouver For more info go to www.harmreductionvictoria.ca



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SOLID provides needle exchange & outreach 7 days a week.

To find out more about our women's night, peer education, support meetings or outreach, contact us at: solidinfo@shawbiz.ca or call

250-298-9497.

All current or former illicit drug users are welcome!

COUNTDOWN: NEARING ONE YEAR SINCE NEEDLE EXCHANGE CLOSURE

Rally >> May 2, 1 pm, Centennial Square <<

On May 2, Harm Reduction Victoria will begin its month-long countdown to the one-year anniversary of the closure of Victoria's only fixed-site needle exchange.

Since May 31 of last year:

- +Needle distribution has been cut by more than 1/3. This has increased the risk of HIV and Hep-C transmission, and the risk of hospitalization for abscesses and other health problems easily prevented by access to safer drug use supplies.
- +The percentage of needles recovered is significantly lower than before the closure, leaving Victoria residents with inadequate resources for safe disposal of their needles.
- +The effectiveness of the mobile exchange has been limited by a 'no-service zone' imposed by VIHA. This has further hampered needle distribution and recovery by preventing service delivery within the downtown core.
- +VIHA and City Hall have continued to sit on clear recommendations from their own reports to enhance needle-exchange services and develop supervised consumption sites.

Too much time has passed already!

VIHA and the city must act now on their stated Harm Reduction mandate.

People who use illicit drugs, their supporters and allies are invited to join Harm Reduction Victoria to in a Town Hall to talk about the current state of needle exchange and access to health care in our community, and to plan for how things must change.

For more info: www.harmreductionvictoria.ca or harmreductionvictoria.ca



Hearing Voices and Choices Cautioning With Conscience

Opinions are like arsewholes. Everybody has one - just waiting in their closet and under the stairs.

Sun-tanned in the sun room the court king plebe and philosopher prince the slightly leftee officialdom made to listen in the round-One with conch he blabbers quotes to Rolling Eyes the Scratching Arses scratch their heads dig down deep in scalp - and personal opinion -Then that bass bassoon-ing voice he likes the monotone sound radio talk show of reason to him it is treason for listener to ask a question he hasn't an answer for ... sound engineer cuts off mike listener just might be sometimes right ... He's been taking trolley buses lite-transit tuk-tuks

hearing voices choices cautioning with conscience these

the only choices
he will share.
Quotes from books
He took from abandoned Monks
The dust
Of silver fishy pages
Moving in drafts outside
With those who live outside
Meet the ballockless bull-marketeers
who gore.
Those in the round

Those in the round in nailed chairs glued to tables looking down at round and deeply felt sandwiches they sleep like bears.

Hair on his head bleeding dye dribbling down his eye down back of shirt

down fish shaped tie dyed tie.
Fly on head feeding
on sugars regurgitating
on shirt collar
eats it all again

plus fluff and dust it tastes of phlegm. Then killing killing piggy We take his conch

We take his conch
Raise the battle cry for lunch
Flies on pig head
We start the fire
We hit the beach
And wait for rescue
In blood and dirt

We really are now quite a crew.

© Paul Burnside March 2009

HAPPY MOTHER'S DAY !!!

UNDERSTAND?!

Mothers are very special and are sent from God to nurture us with unconditional Love.

My mother was all about the unconditional Love.

You are very special to your mother and my mother never played favourites. Loving all of my brothers and sisters and always trying to pursue peace.

Mirthful and musical, Mother always kept her joy in the brightest and darkest of times. Mom would sometimes sing and knew every melody and song.

Others always came first as mother would go over and beyond her way to surprise myself and others with that special gift of her Love.

remendous zeal and energy mother did cooking, decorating, you name it. No one ever cooked as good as mother.

Monourable and honest as a wife and mother completely devoted to her children. Totally honest to everyone and God. And a wild sense of humour.

Everlasting Love that mother gave me has carried me through the most difficult times of my life.

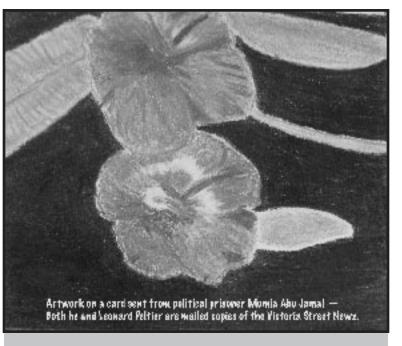
Righteous and of good strong character without being pretentious or a prude. An advocate of justice.

These were all the traits of



my mother who was taken far too soon. Missed and Loved more and more each day. Mark Idczak

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From www.sfbayview.com: On April 6 2009 the U.S. Supreme Court rejected Mumia Abu-Jamal's appeal for a new guilt-phase trial. The Supreme Court has not yet decided whether to consider the Philadelphia DA's separate appeal, which is attempting to execute Abu-Jamal WITHOUT a new sentencing hearing.

You can isten to Abu-Jamal's own response recorded by Noelle Hanrahan of Prison Radio (www.prisonradio.org).
You can also contact the White House to protest this unjust ruling. Call (202) 456-1111 or visit www.whitehouse.gov/CONTACT/.

Don't Judge

Look around you – not at me,
Please tell me what you see,
Don't act as if they're not people too,
But for the grace of God – go you,
All the souls who have lost their way,
Trying to make it through another day.

Don't treat them like they're trash,
Just because they ask you for cash.
Yes – they may buy some down or speed,
Some coke or just a little weed,
Or maybe they really want to eat,
As they trudge along a few more feet.

Others have a different story,
Maybe once they had their days of glory,
The old lady picking bottles off the street,
The hooker being sold – like a piece of meat,
Teenagers who aimlessly roam,
Wishing they had a real home.
Who knows where they've been,
Or what horrors they might have seen?
Could it be they'd rather hide in shame,
So who are you to judge and blame?

What would you say if you knew,
That I came close to being there – too?
Would you look at me with different eyes,
Judging me for becoming what you despise?
I'm not proud of what I became,
I still have memories filled with shame,
So I can't look at them and say,
That I'm better in any way,
Someone helped me before it was too late,
Otherwise that might have been my fate.
You believe that you are my friend,
If you knew the truth about me –
would that friendship end?



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..... check out the Community Wellness Clinics, which run the 3rd Sunday of every month for Co-op member-participants, for an opportunity to connect with a natural health practitioner at a pay-what-you-can rate.

250-483-5503, www.victoriahealthcooperative.ca





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Evo Morales, the first indigenous Bolivian President in the 470 years since the Spanish Conquest.



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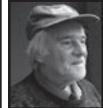
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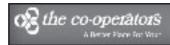
WHERE YOUR \$\$\$\$ GOES

Vendors pay 50 cents for each Street Newz (to pay the printer); whatever you give them is theirs to keep.

There's one salaried Coordinator who produces the Newz. No overhead, no extraneous expenses. May money from the sale of this newspaper be used for peace, and pass through healing hands.

All of us at the Victoria Street Newz extend our sincere gratitude to the Co-operators, and all the individual supporters who sustain this autonomous and

independent alternative newz project.



	Feb	Mar	Apr
Street Newz Revenue			
Paper Sales (from vendors)	619.50	510.50	590.50
Donations	170.00	85.00	30.00
Gifts (incl in-kind)	50.00	62.50	100.00
Advertising	0.00	0.00	0.00
Subscriptions	95.00	35.00	70.00
Bread & Roses Donation to SNZ	800.00	1000.00	1000.00
Total Street Newz Revenue	1734.50	1693.00	1790.50
Street Newz Expenses			
Salaries	800.00	1000.00	1000.00
back pay (sept, oct, nov)	600.00	0.00	0.00
Paper & Printing Costs	565.95	565.95	565.95
Vendor Meeting	0.00	59.48	0.00
Office expenses/website	36.00	62.03	6.00
Postage	54.18	55.76	52.99
Ttl Street Newz Expenses	2056.13	1743.22	1624.94
Street Newz	-321.63	-50.22	165.56
Bread & Roses Revenue			
Grants	0.00	0.00	0.00
Total Bread & Roses Revenue	0.00	0.00	0.00
Bread & Roses Expenses			
Bus Tickets (2 for 1)	40.50	40.50	40.50
Street Newz Donation	1600.00	1000.00	1000.00
Ttl Bread & Roses Expenses	1640.00	1640.00	1640.00
Bread & Roses	-1640.00	-1640.00	-1640.00
Consolidated Ttl (SNZ + B&R)	-1961.63	-1690.2	-1474.4
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